

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | ALMAZ    |        | 06-04-01 |
| O.I.P.E. CLASSIFIER       |          |        | 6-14-01  |
| FORMALITY REVIEW          | MAR      | 572    | 07-31-01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 -: ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim    | Date    |
|----------|---------|
| Final    |         |
| Original |         |
| 1 ✓      | 8/27/01 |
| 2 ✓      |         |
| 3 ✓      |         |
| 4 ✓      |         |
| 5 ✓      |         |
| 6 ✓      |         |
| 7 ✓      |         |
| 8 ✓      |         |
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| 49 ✓     |         |
| 50 ✓     |         |

| Claim    | Date |
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| Final    |      |
| Original |      |
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| 99 ✓     |      |
| 100 ✓    |      |

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 101 ✓    |      |
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| 147 ✓    |      |
| 148 ✓    |      |
| 149 ✓    |      |
| 150 ✓    |      |

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY

208/6  
07/31/01